

Please type a plus sign (+) inside this box →

PTO/SB/08A (08-00)

Approved for use through 10/31/2002, OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

				Complete if Known		
	Substitute for for	n 1449	A/PTO	Application Number	10/813,806	
INEO	RMATION	DIEC	OSLIDE	Filing Date	March 31, 2004	
				First Named Inventor	Constantin Cope, et al.	
SIAI	STATEMENT BY APPLICANT			Group Art Unit	3762	
(us	(use as many sheets as necessary)			Examiner Name Unknown		
Sheet	1	of	2	Attorney Docket Number	8627/487 (PA-5391)	

U.S. PATENT DOCUMENTS

	Cite No. 1	U.S. Patent Document			Date of Publication of	Pages, Columns, Lines, Where Relevant
Examiner Initials*		Number	Kind Code ² (if known)	Name of Patentee or Applicant of Cited Document	Cited Document MM-DD-YYYY	Passages or Relevant Figures Appear
LB	1	5,122,121		Sos et al.	06/16/1992	
LB	2	5,395,347		Blecher et al.	03/07/1995	
LB	3	5,407,434		Gross	04/18/1995	
LB	4	5,772,607		Magram	06/30/1998	
LB	5	5,984,895		Padilla et al.	11/16/1999	
	-					

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. 1	Forei Office 3	ign Patent Document Kind Code 5 Number 4 (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	т°
							ļ
						<u> </u>	├
	-	 					
		1 1					
		†					

EXAMINER SIGNATURE	/Laura Bouchelle/	DATE CONSIDERED	06/19/2006

[•]EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

¹ Unique citation designation number. ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ³ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Please type a plus sign (+) inside this box → Under the Paperwork Reduction Act of 1995, no pers	U.S. Patent are consistent are required to respond to a collection	PTO/SB/08B (08-00) Approved for use through 10/31/2002, OMB 0651-0031 and Trademark Office: U.S. DEPARTMENT OF COMMERCE of information unless it contains a valid OMB control number.
		Complete if Known
Substitute for form 1449B/PTO	Application Number	10/813.806

				Complete if Known	
	Substitute for form	1449	B/PTO	Application Number	10/813,806
INFO	RMATION D	Nec	I ASLIDE	Filing Date	March 31, 2004
				First Named Inventor	Constantin Cope, et al.
SIAI	STATEMENT BY APPLICANT			Group Art Unit	3762
lus	(use as many sheets as necessary)			Examiner Name	Unknown
Sheet	2	of	2	Attorney Docket Number	8627/487 (PA-5391)

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. 1	Include name of the author (in CAPITAL LETTES), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
LB	6	"Pulse-Vu Needle, New Design for Arterial Entry," AngioDynamics, Division of E-Z-EM, Inc., Queensbury, NY, 1994	
LB	7	"Sos Bloodless Entry Needle, Unique Closed System Minimizes Physician Contact with Blood," AngioDynamics, Division of E-Z-EM, Inc., Glens Falls, NY, 1991	
	·		
•			<u> </u>

EXAMINER		DATE	06/19/2006
SIGNATURE	/Laura Bouchelle/	CONSIDERED	00/13/2000

[•]EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.